

WATER WELL REPORT

STATE OF WASHINGTON

29/03-36P

Application No.

Permit No.

(1) OWNER: Name HARLEY SHULTS Address CLINTON WA 98236
 (2) LOCATION OF WELL: County ISLAND SE 1/4 SW 1/4 Sec. 36 T. 29 N. R. 3 E W.M.
 Bearing and distance from section or subdivision corner 1820' EAST 720 NORTH OF SW CORNER SEC 36

(3) PROPOSED USE: Domestic ☒ Industrial ☐ Municipal ☐
 Irrigation ☒ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) _____
 New well ☒ Method: Dug ☐ Bored ☐
 Deepened ☐ Cable ☒ Driven ☐
 Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS: Diameter of well 6 inches.
 Drilled 275 ft. Depth of completed well 273 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6" Diam. from 0 ft. to 269 ft.
 Threaded ☐ " Diam. from _____ ft. to _____ ft.
 Welded ☒ " Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☒

Type of perforator used _____
 SIZE of perforations _____ in. by _____ in.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.

Screens: Yes ☒ No ☐

Manufacturer's Name LOOK
 Type S.S. Model No. _____
 Diam. 6 Slot size 10 from 269 ft. to 273 ft.
 Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel packed: Yes ☐ No ☒ Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? 40 ft.
 Material used in seal BENTONITE
 Did any strata contain unusable water? Yes ☐ No ☒
 Type of water? _____ Depth of strata _____
 Method of sealing strata off _____

(7) PUMP: Manufacturer's Name STA-RITE
 Type SUB HP 1/2

(8) WATER LEVELS: Land-surface elevation 330 ft.
 Static level 247 ft. below top of well Date 8-25
 Artesian pressure _____ lbs. per square inch Date _____
 Artesian water is controlled by _____ (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes ☒ No ☐ If yes, by whom? DRILLER
 Yield: 15 gal./min. with 16 ft. drawdown after 1 hrs.
 " " " " " " " " " " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level

Date of test 8-25
 Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
 Artesian flow _____ g.p.m. Date _____
 Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☒

(10) WELL LOG:

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
TOP SOIL	0	1
GRAY HARD PACKED SAND	1	10
" SAND MED WW	10	24
BROWN CLAY & SAND	24	55
" SAND FINE	55	123
GRAY SAND & CLAY	123	221
" SAND FINE	221	266
" SAND MED WW	266	271
" SAND COARSE WW	271	273
" CLAY & SAND	273	275

Work started 8-10, 1975. Completed 8-30, 1975

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME B & W DRILLING CO
 (Person, firm, or corporation) (Type or print)

Address P.O. Box 55 FREELAND WA
98249

[Signed] DR E. Johnson
 (Well Driller)

License No. 265 Date 11-24, 1975

(USE ADDITIONAL SHEETS IF NECESSARY)



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: APH002

RECORD VERIFICATION (check ☒ one)

- ☒ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

WELL OWNERSHIP IF DIFFERENT FROM WELL REPORT

Name: Scattered Acres Tree Farm

RECEIVED

Street Address: 7105 HEGGENES RD

MAR 28 2007

City: CLINTON

State: WA

DEPT. OF ECOLOGY

WELL LOCATION IF DIFFERENT FROM WELL REPORT

Well Address: 7111 Heggeness Rd/R32936-070-2280

City: Clinton

County: Island

T. 29N

R. 03E W.M.

Sec. 36

SE 1/4 of the SW 1/4

FOR AGENCY USE ONLY

Latitude: 47 57.10308

Longitude: 122 22.20008

Elevation at land surface 471 feet / meters (circle one)

- ☒ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

- ☐ Digital Altimeter
- ☐ Topographic Map

☒ Other: Computer Generated from
DEM and GPS XY Coordinates

Additional Information, if available:

- ☐ Location marked on topographic map (please attach)
- ☐ Location marked on air photo (please attach)

Tag placed and well
GPS'd by:



FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size of casing, type of well, housing, etc.)

Pumphouse Is Behind Tree Sales Shop Straight Back.

Location of Well Identification Tag:

Was supplemental tag needed for easy of identifying well?

☐

Yes

☒

No

If yes, where was tag placed?

D	C	B	A
E	F	G	H
M	L	K	J
N	● P	Q	R

SECTION: 29N/03E-36

COMMENTS:

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Water Right #

Date Issued:

Circle One:

Application

Permit

Certificate

Claim

Exempt

File Original and First Copy with
Department of Ecology
Second Copy — Owner's Copy
Third Copy — Driller's Copy

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Screens: Yes ☒ No ☐

Manufacturer's Name: LOOK
Type: 3-5 Model No. _____
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